COLLECTION AGENT II

Supplemental Questionnaire April 2005

NAME:				
_	(Last)	(First)	(Middle Initial)	Social Security Number

You must complete and submit this application supplement in order to participate in this recruitment. Based on your responses to this application supplement, your job related training and experience will be evaluated using a pre-determined formula. Scores from this evaluation will determine the applicant ranking and placement on the eligible list.

NOTE: Resumes, letters, and other materials will <u>not</u> be evaluated or considered by the rating panel as responses to the items in the supplement.

<u>Please attach your typewritten responses (no more than one page per question) to this sheet and submit with your application form.</u>

<u>Please attach your typewritten responses to items 1 - 5 to this sheet and submit with your application form.</u>

- 1. Describe your experience interviewing debtors and collecting debts. In your answer, include the following:
 - Employer(s);
 - Dates of employment;
 - Duties of your position(s);
 - Techniques used to obtain payment; and
 - Any specific computer programs used.
- 2. Describe your experience managing caseloads. In your answer, include the following:
 - Number of cases worked on a daily and month basis;
 - Types of interviews (i.e., phone, in-person, etc.); and
 - Procedures followed and your responsibilities from the time of receipt to case completion.
- 3. Describe your experience preparing accounts for legal action. In your answer, include the following:
 - Your level of involvement;
 - If you initiated legal actions; and
 - Enforcement processes used.
- 4. Describe your experience reading, interpreting and applying complex rules, regulations and statutes as related to collection activities. In your answer, include the source references used most often in your daily work.
- 5. Describe your experience working in a team environment. In your answer, include the following:
 - The team member duties:
 - How you supported each other;
 - Issues or problems you encountered; and
 - Solutions or conclusions reached.

I certify that all the statements made in this application supplement are true, complete and correct to the best of my knowledge and are made in good faith. I understand that any misrepresentation and/or falsification of my answers may result in rejection of my application for this recruitment. My signature authorizes Placer County to make any appropriate investigations to verify information.

Signature of Applicant:	Date:
-------------------------	-------